U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

## FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved
Office of Management
and Budget
No. 1215-0188
Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.

	For Canada Case Only REC'D
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READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U - 3257	2. Fiscal Year Covered From:	
	1 / 1 / 2004 Through: 12 / 31 / 2004	
3. Name and address of person filing.	4. Name, file number, and address of labor organization.	
Name Matthew A Baron	Name American Federation of Musicians	
	Labor Organization File Number 000-207	
P.O. Box, Bldg., Room No., if any	P.O. Box, Building and Room Number, if any	
Street 6300 Orange Street, #13	Street 1501 Broadway, #600	
City Los Angeles	City New York	
State California ZIP Code + 4 90048	State New York ZIP Code + 4 10036	
5. Position in labor organization.  Manager		

Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):

A. Held an interest in, engaged in transactions (including loans) with monetary value from an employer whose employees your organized.	, or derived income or other economic benefit of zation represents or is actively seeking to represent.
6. Name and address of Employer (including trade name, if any).	7.a. Nature of Interest, Transaction, or Income.
Name Millie Film Development, LLC	Worked as an independent contractor providing story analysis for possible TV & motion picture projects.
Trade Name, if any:	
P.O. Box, Bldg., Room No., if any	
	7.b. Amount.
Street 1990 South Bundy Drive, #200	
City Los Angeles	\$3,975
State California ZIP Code + 4 90025	

## Signature

15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information
submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the
undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)

		2 <b>/</b>
Signed	a / /	I have
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On 07/07/2005

323-646-0373

Date

Telephone Number

ame of Person Filing Matthew Baron		File Number <b>U</b> - <b>3</b> 35 <b>7</b>
B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.		
8. Name and address of Business (including trade name, if any).	9. Business deals with:	
Name	a. Labor Organizati	ion
Trade Name, if any:	b. Trust	
P.O. Box, Bldg., Room No., if any	c. Employer	
Street		
City		
State ZIP Code + 4		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing	ng.
Name		
Trade Name, if any:		
P.O. Box, Bidg., Room No., if any		
Street	11.b. Approximate dollar value	e of such dealing.
City	12.a. Nature of interest held	or income received.
State ZIP Code + 4		
	1	
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17. · · · · · · · · · · · · · · · · · · ·	12.b. Amount.	
C. Received from any employer (other than an employer covered under or from any labor relations consultant to an employer any payment of money	r parts A and B above) or other thing of value.	
Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.	
Name		
Trade Name, if any:		
P.O. Box, Bldg., Room No., if any		
Street		ļ
City		
State ZIP Code + 4		
13.b. Is the Business an Employer or Consultant?	14.b. Amount of payment.	

Name of Person Filing	Matthew	Baron	
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## Part A Continuation Page

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.		
6. Name and address of Employer (including trade name if any).	7.a. Nature of Interest, Transaction, or Income.	
Name Castle Rock Entertainment	Worked as an independent contractor providing story analysis for possible TV & motion picture projects.	
Trade Name, if any:		
P.O. Box, Bldg., Room No., if any		
C.O. Box, Blag, Nobili No., if any	7.b. Amount.	
Street 355 North Maple Drive		
City Beverly Hills	\$635	
State California ZIP Code + 4 90210		
<ul> <li>A. Held an interest in, engaged in transactions (including loans) with, or derived employees your organization represents or is actively seeking to represent.</li> </ul>	Income or other economic benefit of monetary value from an employer whose	
Name and address of Employer (including trade name if any).	7.a. Nature of Interest, Transaction, or Income.	
Name Universal Home Entertainment	Worked as an independent contractor providing story analysis for possible TV & motion picture projects.	
Trade Name, if any:		
P.O. Box, Bldg., Room No., if any	7.b. Amount.	
Street 100 Universal City Plaza		
•	\$2,000	
City Universal City	\$2,000	
State California ZIP Code + 4 91608		
A. Held an interest in, engaged in transactions (including loans) with, or derived employees your organization represents or is actively seeking to represent.	income or other economic benefit of monetary value from an employer whose	
6. Name and address of Employer (including trade name if any).	7.a. Nature of Interest, Transaction, or Income.	
Name		
Trade Name, if any:		
P.O. Box, Bldg., Room No., if any		
Street	7.b. Amount.	
	·	
City		
State ZIP Code + 4		
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